Application and Candidacy Review Cycle and Monitoring Policy

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I. Purpose
The Middle States Commission on Higher Education (MSCHE or the Commission) seeks to ensure that the process for institutions of higher education applying for candidate for accreditation status is rigorous, consistent, and equitable. The purpose of this policy is to establish the timeline and components of the Commission’s application and candidacy review cycle. Additional information about reviews, reports, and visits related to the application process can be found in Accreditation Activities Guidelines.

II. Statement of Policy
The Commission shall establish a rigorous application process to ensure that a successful applicant institution of higher education has demonstrated that it meets minimum requirements prior to pursuing Candidate for Accreditation Status. The Commission shall limit Candidate for Accreditation Status to those institutions that can demonstrate compliance with standards for accreditation, requirements of affiliation, policies and procedures, and applicable federal regulatory requirements and are likely to attain accreditation in accordance with federal regulation § 602.23(f)(1)(i). The institution shall comply fully, with honesty and integrity, and in a timely fashion, with the Commission’s requirements throughout the application and candidacy review cycle and monitoring. The Commission shall permit an institution to voluntarily withdraw from the Commission’s application process at any time. An application may also expire if conditions are not met within the timeframes established in procedures.

III. Procedures
The Commission staff will develop procedures as are necessary to ensure the consistent implementation of policy. See the Commission’s Application and Candidacy Review Cycle and Monitoring Procedures.

IV. Definitions
The following definitions are used in this policy and/or procedures:

A. Accreditation activity. All activities including but not limited to reviews, reports, and visits conducted by Commission representatives related to the institution’s accreditation phase, accreditation status, or scope of accreditation occurring throughout the accreditation review
cycle and during ongoing monitoring activities for a member (accredited or candidate) or applicant institution.

B. **Accreditation materials.** All documentation related to accreditation activities including but not limited to the institution’s written reports to the Commission, submitted evidence, team reports, institutional responses, confidential briefs, complaints or third-party comments, action notifications, substantive change requests, transcripts of proceedings, team rosters, and any correspondence of record. Accreditation materials are treated as confidential by Commission representatives, become part of the institutional record, and are retained in accordance with the Commission’s *Maintenance and Retention of Commission Records Policy and Procedures*.

C. **Accreditation phase.** The stage of the institution in the accreditation lifecycle (applicant, candidate, accredited). The phase will also indicate if an institution is a former applicant, candidate, or accredited institution. Accreditation phase is posted on the institution’s directory listing on the MSCHE website, with the exception of applicant institutions which are not displayed publicly in the institution directory.

D. **Accreditation Readiness Report (ARR).** The report an applicant institution will develop and submit to demonstrate that it meets the Commission’s standards for accreditation, requirements of affiliation, policies and procedures, and applicable federal regulatory requirements. The institution may be asked to submit an updated ARR.

E. **Accreditation status.** The member institution’s standing with the Commission based on the most recent grant of candidate for accreditation status, grant of accreditation, reaffirmation, non-compliance, or adverse action taken by the Commission. Accreditation status is posted on the institution’s directory listing on the MSCHE website.

F. **Applicant institution.** A postsecondary institution that is in the process of submitting an application for Candidate for Accreditation Status, but is not a member of the Middle States Commission on Higher Education.

G. **Authorized representatives of member institution.** The institution will designate specific individuals to serve as authorized representatives of the institution when they designate them as key contacts (CEO, ALO, CAO, CFO, Portal Delegate, Application Manager) in the secure MSCHE portal. Authorized representatives act responsibly on behalf of the institution in matters related to accreditation and are individuals with whom the Commission will directly communicate. The Commission may consider the Chair of the Board to be an authorized representative of the institution.

H. **Candidate for Accreditation Status.** An accreditation status granted by the Commission for a period of time, not to exceed five years, while the institution engages in its first comprehensive self-study evaluation. An institution that is granted Candidate for Accreditation Status by the Commission has demonstrated that it appears to meet the Commission’s standards for accreditation, requirements of affiliation, policies and procedures, and applicable federal regulatory requirements and is likely to attain accreditation.

I. **Commission representative.** Any individual who represents or serves the Commission,
including but not limited to peer evaluators, Commission staff, and Commissioners.

J. **Institution of higher education.** A postsecondary educational institution that awards postsecondary degrees and is authorized or licensed from an appropriate jurisdiction. Institutions that offer only postsecondary certificates, diplomas, or licenses are not eligible for accreditation by the Middle States Commission on Higher Education.

K. **Institutional Profile.** The data collection tool that a preapplicant institution will complete to provide basic information about the institution and establish a baseline for the institution’s scope of accreditation.

L. **Main campus.** A parcel of land owned by, controlled by, leased by, or allocated for use by an institution within the same reasonably contiguous geographic area, in which the institution’s primary administration, classroom buildings, residence halls, library, and other buildings are housed, and the facilities are used by the institution in direct support of or in a manner related to, the institution's educational purposes.

M. **Peer evaluator.** An individual who is selected and assigned to an accreditation activity by the Commission staff. This individual is part of the multi-level accreditation decision-making process and will participate in the proposal of an accreditation action. Peer evaluator is not intended to include a Commissioner serving in an official Commissioner capacity on a committee or the Commission. Peer evaluator is not intended to include an assistant or any other observer of an accreditation activity.

N. **Scope of accreditation.** The institution’s accreditation status covers a defined scope of educational offerings, including but not limited to credential levels, delivery methods, and locations (branch campuses, additional locations, and other instructional sites) which have been reviewed by the Commission during accreditation activities. Any changes proposed by a member institution that are considered substantive must be reviewed through the substantive change review process prior to implementation in order to be included within the institution’s scope of accreditation by the Commission.

O. **Related entity.** A non-accredited entity that shares decision making responsibility with the institution’s governing body. A related entity may be a corporate parent, system administration or board, religious sponsor, funding sponsor (which, in some cases, may include an equity or investment fund), or other entity that can affect decisions related to accreditation. Related entities may include institutional or corporate layers or groups. Local, county, and state legislatures, other accreditors, local advisory boards, and government agencies are not considered related entities. Written arrangements in which the institution has a written contract for services with a non-accredited entity are not considered related entities.

P. **Teach-out.** A process during which an institution, or institutional location that provides 100 percent of at least one program engages in an orderly closure or when, following the closure of an institution or campus, another institution provides an opportunity for the students of the closed school to complete their program, regardless of their academic progress at the time of closure. *(federal definition found in 34 CFR § 600.2, slightly modified to remove the word “program”)*
Q. **Teach-out agreement.** A written agreement between two or more institutions that provides for the equitable treatment of students and a reasonable opportunity for students to complete their program of study if an institution, or an institutional location that provides 100 percent of at least one program offered, ceases to operate before all enrolled students have completed their program of study. (*federal definition found in 34 CFR § 600.2*)

R. **Teach-out plan.** A written plan developed by the institution that provides for the equitable treatment of students to complete their education, including any teach-out agreements that the institution has entered into or intends to enter into with another institution. (*federal definition found in 34 CFR § 600.2*)

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Federal Regulations: 34 CFR § 602.11 Geographic scope of accrediting activities; § 602.16 Accreditation and pre-accreditation standards; § 602.18 Ensuring consistency in decision-making; § 602.19 Monitoring and reevaluation of accredited institutions and programs; § 602.20 Enforcement of standards; § 602.23 Operating procedures all agencies must have; § 602.24 Additional procedures certain institutional agencies must have; § 602.26 Notification of accrediting decisions; § 602.28 Regard for decisions of States and other accrediting agencies;
Standards: Standard I Mission and Goals; Standard II Ethics and Integrity; Standard III Design and Delivery of the Student Learning Experience; Standard IV Support of the Student Experience; Standard V Educational Effectiveness Assessment; Standard VI Planning, Resources, and Institutional Improvement; Standard VII Governance, Leadership, and Administration.
Related Documents: Accreditation Actions Policy and Procedures; Accreditation Activities Guidelines; Accreditation Review Cycle and Monitoring Policy and Procedures; Communication in the Accreditation Process Policy and Procedures; Dues and Fees Policy and Procedures; Teach-Out Plans and Agreements Policy and Procedures; Travel Policy and Procedures;